

Pastor's Reference

APPLICANT, FILL IN HERE ONLY. Expected Enrollment Date _____

Name: _____

Address: _____
Street Address City, State, Zip

Telephone: () _____ Male Female Date of Birth: _____

1. Please rate the applicant either Good (G), Average (A), Poor (P), or Unknown (U) in the following areas:

Intelligence _____	Cooperation _____	Leadership _____	Sociability _____
Dependability _____	Ambition _____	Character _____	Common Sense _____
Adaptability _____	Punctuality _____	Discretion _____	Emotional Stability _____

2. Is the applicant a member of your church? _____
3. From your knowledge, or after a personal interview, have you determined that the individual has received Jesus Christ as personal Savior? _____
4. Do you feel the individual presents a Godly testimony in areas of finances, relationships, dealing with the opposite sex, community, etc.? _____
5. Is the applicant a soul-winner? _____ 6. Is the applicant a faithful worker in the church? _____
7. In what way is the individual involved in the church? _____

8. How long have you known the applicant? _____ 9. Are you related to the applicant? _____
10. Does the applicant present a clean, neat appearance at all times? _____
11. Comment briefly on the family situation of the applicant. _____

12. Does the individual have any outstanding talents, skills, abilities? _____

13. Are there special circumstances, negative character traits, learning problems, health conditions, etc. we should know about? _____

14. Do you recommend the applicant be accepted as a student at LOLCS?

Highly recommended _____	*Recommended with reservation _____	Comments: _____
Recommend _____	*NOT Recommended _____	_____

*Please comment if these responses are selected.

Pastor's Name: _____

Church Name: _____ Website: _____

Address: _____
Street Address City, State, Zip

Telephone: () _____ Email Address: _____

Signature: _____ Date: _____

PLEASE SEND DIRECTLY TO LOLCS. DO NOT RETURN TO APPLICANT. THANK YOU.